

DA C \$



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Petitions, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 6, 2004

MARTHA A. AHERNE
(name)
Martha A. Aherne
(signature)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Group Art Unit
Frait, et al.)	
)	Examiner:
Serial No. 10/622,921)	
Filed: 07/18/2003)	
)	
For: METHOD AND APPARATUS)	
FOR FORMING A PART WITH)	Attorney Docket 1-15947
DAMPENER)	

Mail Stop Petitions
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PETITION UNDER 37 C.F.R. 1.10(C)

Honorable Sir:

On December 8, 2003, applicants' attorney submitted a request for a corrected filing receipt to correct the filing date for the above-captioned application. Specifically, applicants' attorney received a Filing Receipt listing the filing date as 07/17/2003. Applicant's attorney responded with a copy of the Certificate Under 37 C.F.R. 1.10 of Mailing by Express Mail showing the filing date as 07/18/2003 and requesting modification of the Filing Receipt.

Applicants' attorney received a Response To Request For Corrected Filing

Receipt from the Office dated 12/24/2003 indicating that the present Petition is required


to make the filing date change. The Response document also indicated that a copy of the Express Mail label should be submitted with the present Petition. A true copy of the label is included herewith showing the date in as 07/18/2003. Additionally, a copy of the Express Mail Certificate having the Express Mail label number and identifying the correspondence that was sent thereunder is included.

The petition fee of \$130.00 under 37 C.F.R. 1.17(h) is included as a check herewith. Please charge Deposit Account No. 13-1816 for any over or under payment.

The error in filing date appears to be an Office error and not attributable to any action or inaction by applicants' attorney. Therefore, applicants respectfully request a refund of this petition fee in the amount of \$130.00 via a check or to applicants' attorney's deposit account.

Respectfully submitted,

MARSHALL & MELHORN, LLC



Stephen P. Evans
Registration No. 47, 281

ATTORNEYS
MARSHALL & MELHORN, LLC
Four SeaGate, 8th Floor
Toledo, OH 43604
(419) 249-7100 (main)
(419) 249-7151 (fax)



Certificate under 37 CFR 1.10 of Mailing by "Express Mail"

EV 151027597 US

"Express Mail" label number

July 18, 2003

Date of Deposit

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above, and is addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

A handwritten signature in cursive script, reading "Martha A. Aherne".

Signature of person mailing correspondence

Martha A. Aherne

Typed or printed name of person mailing correspondence

1. Fee Transmittal
2. Utility Patent Application Transmittal
3. Combined Declaration and Power of Attorney in Original Application
4. 17 page Specification
5. 8 Drawings
6. Recordation Form Cover Sheet
7. Assignment of Invention
8. Check in the Amount of \$1,108.00
9. Return Receipt Card

State of Ohio)

County of Lucas)



I, Stephen P. Evans, a Notary Public in and of the State of Ohio, maintaining my office at Four SeaGate - 8th Floor, Toledo, Ohio, USA, do hereby certify that the attached is a true copy of the Express Mail Customer Copy label having a Date in of 07/18/2003 for U.S. Patent Application Serial No. 10/622,921 for "Method and Apparatus for Forming a Part with Dampener" by Frait ,et al.

Signed in Toledo, Ohio, this 6th day of January 2004.



STEPHEN P. EVANS
Notary Public - State of Ohio
Commission has no expiration.
Section 147.03 R.C.

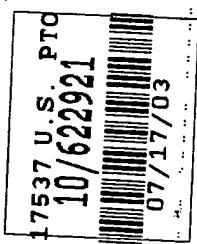
Stephen Evans
Notary Public

SERIAL NO. _____ FILED
 PATENT NO. _____ ISSUE
 APPLICANT(S): FRUIT ETAL
 PAPERS FILED HEREWITH:
☒ TM-APPLN/EXHIBITS
☒ PATENT APPLN
☐ PROV ☒ UTILITY
☐ CONT ☐ CIP ☐ CPA
☐ PCT ☐ DIV
☐ 35 USC 371 (DO/EO/US)
☐ AMENDMENT
☐ PRELIMINARY
☐ LICENSE-FOREIGN FILING
☐ EXPRESS MAIL CERTIFICATE
☐ REQUEST FOR CORRECTED FILING
☐ OTHER Fee Transmittal
Combined Declaration
 THE PATENT OFFICE
 ACKNOWLEDGES



SERIAL NO. _____ FILED
 PATENT NO. _____ ISSUED
 APPLICANT(S): FRUIT ETAL
 PAPERS FILED HEREWITH: FEES \$1018.00

☐ TM-APPLN/EXHIBITS
☒ PATENT APPLN
☐ PROV ☒ UTILITY
☐ CONT ☐ CIP ☐ CPA
☐ PCT ☐ DIV
☐ 35 USC 371 (DO/EO/US)
☐ AMENDMENT
☐ PRELIMINARY
☐ LICENSE-FOREIGN FILING
☒ EXPRESS MAIL CERTIFICATE
☒ REQUEST FOR CORRECTED FILING RECEIPT
☐ OTHER Fee Transmittal
Combined Declaration
 THE PATENT OFFICE MAIL ROOM DATE STAMP HEREON
 ACKNOWLEDGES RECEIPT OF THE ABOVE PAPERS



86-03
fm
Utility Patent Appln. Transmittal
Combined Declaration for Check
Please return
CHRO



EV 151027597 US



UNITED STATES POSTAL SERVICE®

Customer Copy
 Label 11-F October 2001

Post Office To Addressee

ORIGIN (POSTAL USE ONLY)			
PO ZIP Code <u>43604</u>	Day of Delivery <input checked="" type="checkbox"/> Next <input type="checkbox"/> Second <input type="checkbox"/>	Flat Rate Envelope	
Date In Mo. <u>7</u> Day <u>18</u> Year <u>03</u>	<input checked="" type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$ <u>17.85</u>	
Time In <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee	
Weight lbs. <u>8.7</u> ozs.	Int'l Alpha Country Code	COD Fee	Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials <u>SS</u>	Total Postage & Fees \$ <u>17.85</u>	

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.		
<input type="checkbox"/> NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		
Customer Signature		

CUSTOMER USE ONLY
 METHOD OF PAYMENT:
 Express Mail Corporate Acct. No. _____
 FROM: (PLEASE PRINT) PHONE 419 249-7100
Stephen P. Evans, Esq.
MARSHALL & MELHORN
4 SEAGATE FL B
TOLEDO OH 43604-2638
 H1715 15947 001

Federal Agency Acct. No. or
 Postal Service Acct. No. _____
 TO: (PLEASE PRINT) PHONE _____
Mail Stop Patent Application
Bondis Bond 4500r Patents
P. O. Box 1450
Alexandria, VA 22313-1450

PRESS HARD.
 You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com

